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TIPPECANOE COUNTY  
HEALTH DEPARTMENT

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2016  
Annual Report

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[www.tippecanoe.in.gov](http://www.tippecanoe.in.gov)

# Mission Statement

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Our mission as the Tippecanoe County Health Department is to enhance the health and welfare of Tippecanoe County through public health education, promotion, prevention and the protection of public and environmental health.

## Health Department Services

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- **Vital Records**

Birth & Death Certificates  
Adoptions  
Paternity Affidavits  
Registration of Home Births

- **Food Safety and Protection**

Food Handler Certification  
Employee Health Controls  
Controlling hands as a vehicle of contamination  
Time and temperature parameters for controlling pathogens  
Consumer advisory

- **Environmental Health Services**

Waste water disposal and treatment  
Surface water pollution  
Indoor air pollution & mold  
Disposal of solid wastes  
Rural housing / Meth complaints

- **Public Health Nursing**

Immunizations  
ESF 8 Health & Medical Group Leader  
Tuberculosis Intervention and Outreach  
Communicable Disease Investigations  
STD Intervention

- **WIC (Women, Infants, and Children) Program**

Breastfeeding support for new mothers  
Food packages to infants, children and new mothers  
Nutrition education classes  
Referrals to other supporting resources

- **Emergency Preparedness**

Emergency Preparedness Planning and Response, Tippecanoe County Health and Medical Coalition (ESF-8)  
Coordination, Tippecanoe County Medical Reserve Corps Coordination and Emergency Preparedness Training and Exercise.

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# MESSAGE FROM THE HEALTH OFFICER

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As I reflect on the past year, one word that comes to mind is “eventful.” Among the Health Department’s many accomplishments during 2016, our staff:

- Planned, managed, and executed a large-scale MMR vaccine clinic at Purdue University in response to a mumps outbreak, vaccinating over 800 individuals
- Within 48 hours of notification, conducted an onsite clinic providing antibiotic prophylaxis to 80 individuals at a local elementary school in response to a case of bacterial meningitis
- Successfully submitted hundreds of documents in support of the Department’s application for accreditation, paving the way for a site review by the Public Health Accreditation Board in May 2017
- Obtained county and state approval to establish a syringe services program to stop the spread of hepatitis C among individuals who inject drugs



All of this was in addition to conducting over 1500 restaurant inspections, administering thousands of routine immunizations, tracking numerous communicable diseases, providing tuberculosis treatment and surveillance, processing thousands of birth and death certificates, addressing numerous unsafe septic and living conditions, enforcing the county’s new tattoo ordinance, and collaborating successfully with colleagues at the Indiana State Department of Health and many community organizations.

None of this would have been possible without the tireless efforts of our outstanding Health Department staff, who have responded admirably to numerous challenges during 2016. I am certain that their high level of commitment and dedication will continue to serve Tippecanoe County well during 2017 and beyond.

Respectfully,

A handwritten signature in dark ink, appearing to read "J. Adler".

Jeremy Adler, M.D.

## MESSAGE FROM THE ADMINISTRATOR

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*First of all, I would like to thank the staff, Dr. Adler and the Board for all fabulous work that they perform tirelessly for the citizens of Tippecanoe County. Without contributions from everyone, this department would not be able to achieve the levels of success in which we have seen in 2016.*

*Many of the highlights in 2016 include; Purdue's Mumps Outbreak, the Meningitis clinic at Mintonye Elementary School and the Restaurant hearing and closings.*

*And finally all the work and dedication that were needed in the research and meetings that were necessary in the passing of the Syringe Exchange Program which will have a lasting impact on the citizens of Tippecanoe County for years to come.*

*It was sad to see the loss of many key personnel in 2016; however that was tempered by the addition of new people who have arrived with new and innovative ideas to help move this Department forward.*

*As we move forward, one thing I will remember about 2016 were the great steps we took toward Accreditation, a new physical location and our now annual all staff meeting. All of these have shown that we are ready to move forward and become a leader in the field of Public Health.*

*Sincerely,*

  
Craig Rich





# 2016 in Review

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Tippecanoe County Health Department (TCHD) is committed to promoting, preventing and protecting the Tippecanoe County Community. The growing awareness of public health issues has developed a strong relationship with our community members. Several new programs and services have been implemented at TCHD this year to promote safe practices and healthy lifestyles. TCHD has seen a rise in the Hepatitis C numbers resulting in a newly approved Syringe Services Program.



Our Immunization division has taken on the Immunization Grant for a second year in a row while, they implemented a travel vaccine clinic this year. We have added positions in our foods and STD division to meet the needs of the community. Our overall year has been successful as we continue to monitor the health of our community and educate them on public health prevention methods.

On October 17, 2016 the Tippecanoe County Health Officer declared a public health emergency due to the identification of a Hepatitis C (HCV) epidemic within the county. According to the Indiana State Department of Health to decrease the spread of Hepatitis C, a serious long term debilitating disease, a harm reduction program was required.

Dr. Adler initiated a program “Gateway to Hope” that will provide quick, accurate testing of Hepatitis C and HIV. It will also offer referrals and/or onsite access to substance abuse counseling/treatment, social service agencies, health care services and insurance navigators. This will include a Syringe Exchange Program that was approved in November by the Tippecanoe County Commissioners and later approved by the Indiana State Department of Health in December. This program will begin in 2017 after we secure a location and funding.

On Monday April 5, 2016, the Tippecanoe County Health Department (TCHD) coordinated with Purdue University and the Indiana State Department of Health (ISDH) to investigate and assess the potential risk to the Purdue Community and public of Tippecanoe County after 5 confirmed cases of the Mumps were identified within the student population on the main campus in West Lafayette, Indiana. A Mumps outbreak subsequently occurred. This provided an opportunity to exercise our existing plans and capabilities to respond to and recover from a Mumps Outbreak.



As our year came to a close we applied for National Accreditation through the Public Health Accreditation Board and will see a Site Visit in May 2017. We also created a new award that will be given annually in remembrance of Dr. Wendell Riggs. He was elected at the Tippecanoe County Health Department President in 1975 and served as the County Health Officer from 1985-2006.

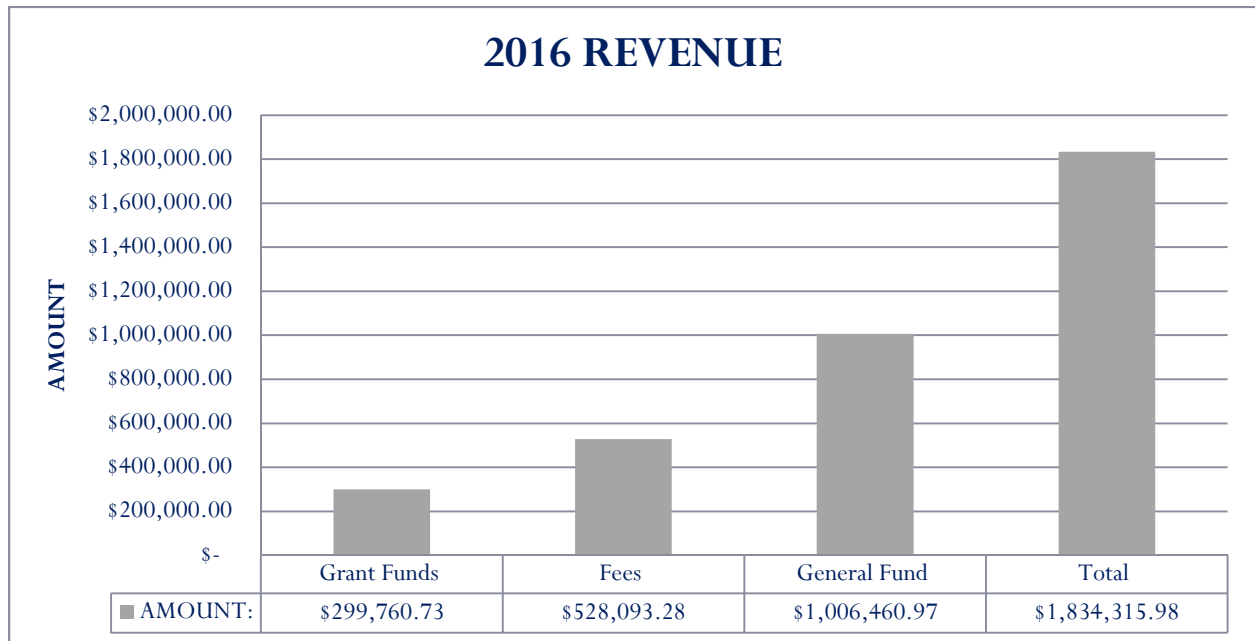
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# Division

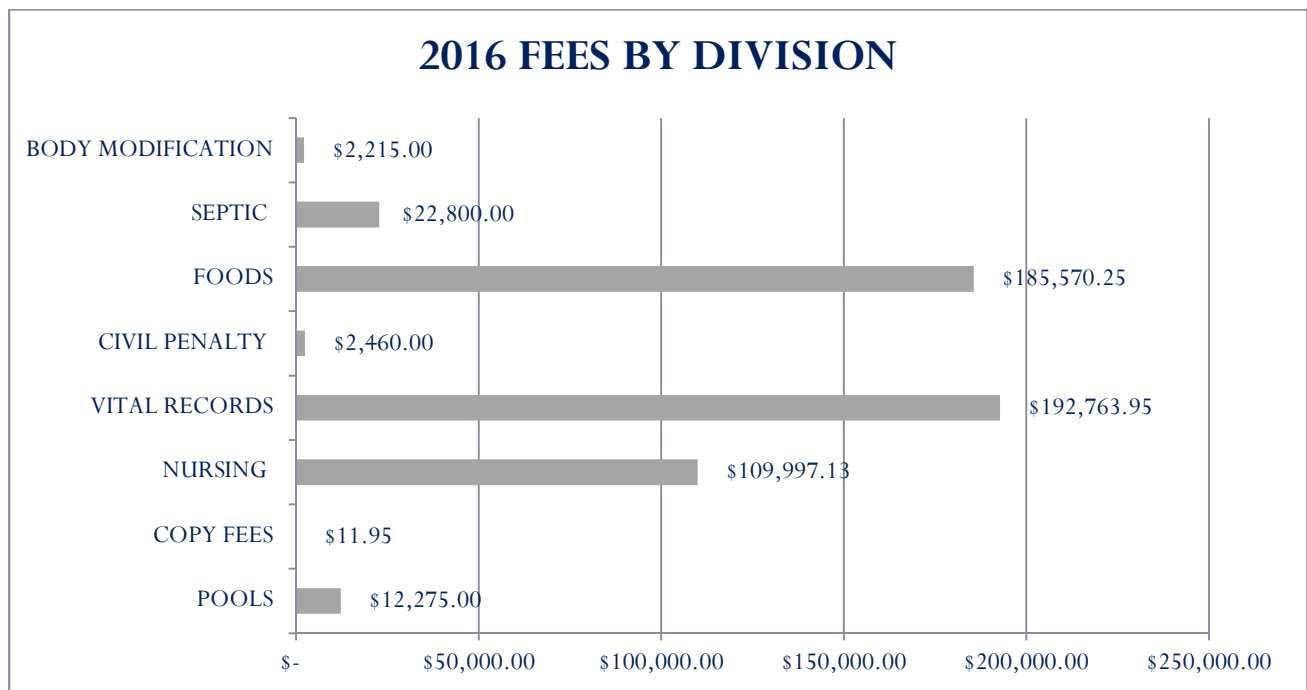
## Reports

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# Financial Statement



This graph provides a graphical representation of the grants, fees, and general fund revenue the Tippecanoe County Health Department received in 2016.



This graph provides a graphical representation of the fees brought in by each different part of the Tippecanoe County Health Department.



# ACCREDITATION

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Our site visit for Accreditation is scheduled for May 2017 with the Public Health Accreditation Board (PHAB).

In 2017, the Tippecanoe County Health Department will hopefully achieve National Accreditation through PHAB.

## Accreditation Coordinators

Brianna Lerch

&

Pauline Shen



# EMERGENCY PREPAREDNESS

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The Tippecanoe County Health Department Emergency Preparedness Division had a busy year in 2016.

In January, the Emergency Preparedness Division commenced Zika virus emergency preparedness planning efforts. Zika virus emergency preparedness planning efforts incorporated best practices from prior local communicable disease planning as well as applicable guidance issued by the Centers for Disease Control and Prevention (CDC) and the Indiana State Department of Health (ISDH). The Emergency Preparedness Division concluded Zika virus related emergency preparedness planning efforts with the completion of a Zika virus Hazard – Specific Annex in December. For the record, the Division would like to report that no Zika virus cases emerged within Tippecanoe County during 2016.

The 2014 – 2016 Ebola Outbreak in West Africa was finally declared over when the World Health Organization (WHO) terminated the Public Health Emergency of International Concern (PHEIC) on March 29, 2016. In accordance with the termination of the PHEIC by the WHO, the Emergency Preparedness Division concluded emergency preparedness planning and response efforts of the Tippecanoe County Health Department. An After Action Report/Improvement Plan was completed by the Emergency Preparedness Division to document the critical strengths and areas for improvement that were captured throughout emergency preparedness planning and response efforts for Ebola. The Division would like to note that although the Tippecanoe County Health Department did monitor several “low – risk” individuals that had returned to the community after travel to Ebola impacted areas, none of these “low – risk” individuals ever became infected with Ebola and no cases of Ebola ever emerged within Tippecanoe County throughout the duration of the outbreak.

In April, a Mumps Outbreak was identified at Purdue University. The Emergency Preparedness Division facilitated emergency preparedness planning and response efforts for the Tippecanoe County Health Department. This included the activation of the departments Emergency Response Team (ERT) and the planning process according to Incident Command System (ICS) concepts. The Division and the ERT also coordinated closely with several external organizations to include: Purdue Emergency Preparedness and Planning Office, Purdue University Fire Department, Purdue University Police Department, Purdue Recreational Sports Center, Purdue College of Pharmacy, Purdue School of Nursing, Purdue College of Health and Human Services, Purdue University Student Health Center, Tippecanoe County Emergency Management Agency, American Red Cross, Fountain/Warren County Health Department, Hamilton County Health Department, Howard County Health Department and Indiana State Department of Health. Through the use of the ICS planning process and close coordination with several external organizations, two Points of Dispensing (PODs) were planned to provide Measles, Mumps and Rubella (MMR) vaccinations. Incident Action Plans were also jointly developed for both PODs by the Tippecanoe County Health Department and Purdue University. One POD was established on April 12<sup>TH</sup> and 300 MMR vaccinations were provided. The second POD was established on April 18<sup>TH</sup> and 550 MMR vaccinations were provided. As a result, in total 870 MMR vaccinations were provided. On August 20<sup>TH</sup>, 2016 the Mumps Outbreak was declared officially over after two incubation periods elapsed after the last identified case and no other new cases emerged. Only a total of 59 cases were reported during this outbreak. An After Action Report/Improvement Plan was completed by the Emergency Preparedness Division to document the critical strengths and areas for improvement that were captured throughout emergency preparedness planning and response efforts for Mumps.



**Photo:** Mumps POD at Purdue University. Extreme heat impacted Tippecanoe County in July. In response, the Emergency Preparedness Division developed a Press Release and disseminated it to local media outlets in an effort to inform the public of proper precautions to ensure their health and safety during the duration of the extreme heat.

In October, a case of Neisseria Meningitis was identified in a student at Mintonye Elementary School. The Emergency Preparedness Division facilitated emergency preparedness planning and response efforts of the Tippecanoe County Health Department. This also included the activation of the departments Emergency Response Team (ERT). The Division and the ERT also coordinated closely with several external organizations to include: Tippecanoe County Emergency Management Agency, Tippecanoe School Corporation and Indiana State Department of Health. Through close coordination with several external organizations a Point of Dispensing (POD) was planned at Mintonye Elementary School to provide the close contacts with the antibiotic Ciprofloxacin (oral suspension or pill form) as Mass Prophylaxis in an effort to protect their health and prevent additional illnesses. The POD was established according to the developed Incident Action Plan (IAP) on October 20<sup>TH</sup> and 79 doses of Ciprofloxacin (oral suspension and pill form) were dispensed. Only 1 case was ever reported and further illness did not occur thanks to a great response by the Tippecanoe County Health Department and several external organizations. An After Action Report/Improvement Plan was completed by the Emergency Preparedness Division to document the critical strengths and areas for improvement that were captured throughout emergency preparedness planning and response efforts for Meningitis.

In addition to all of the above emergency preparedness planning and response efforts, the Emergency Preparedness Division also completed all deliverables of the Budget Period 4 (BP4) Grants (BASE, MRC and Ebola) for Fiscal Year 2016. This effectively earned the following funding amounts to further emergency preparedness: BASE Grant \$24,742; MRC Grant \$5,411; and Ebola Grant \$31,624. After BP4 was completed the Emergency Preparedness Division also began working on deliverables of the Budget Period 5 (BP5) BASE Grant for Fiscal Year 2017. By the end of 2016, over half of the deliverables of the BP5 BASE Grant had been completed. In 2016 the Emergency Preparedness Division also further developed the Tippecanoe County Health and Medical Coalition (ESF-8) by developing new partnerships with a few Mental Health and Long Term Care facilities.

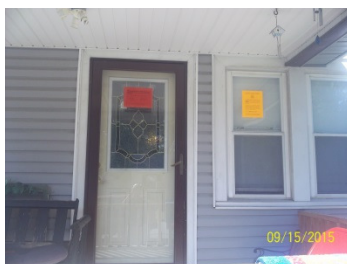
Two Part-Time Medical Reserve Corps Coordinators also made great strides to further develop the Tippecanoe County Medical Reserve Corps (MRC) in 2016. The MRC Coordinators assisted with the following: general emergency preparedness planning, modification of the Volunteer Management Functional Annex, completion of MRC related Grant Deliverables, volunteer recruitment efforts at local medical facilities and maintenance of the Tippecanoe County MRC Profile on the National MRC Webpage. Additionally, the MRC Coordinators also assisted the Emergency Preparedness Coordinator with the completion of a special project which was the continuation of a Point of Dispensing (POD) Exercise Program with Purdue University's School of Nursing, Homeland Security Institute, Public Health Student Association, College of Pharmacy and Emergency Preparedness and Planning Office. The main focus of this POD Exercise was to train Purdue Students on POD Operations and to highly encourage them to register as local MRC Volunteers. Further, the MRC was utilized this year by IU Health Arnett during the Convoy for Hope event on October the 8<sup>th</sup>. Four Tippecanoe County MRC Volunteers assisted IU Health Arnett with Health and Wellness Screenings during the event.

Moving forward, the Emergency Preparedness Division has the following Goals for 2017:

- 1) Continue development of Functional Annexes and Hazard – Specific Annexes to the All – Hazards Emergency Operations Plan (EOP).
- 2) Maintain coordination of quarterly Tippecanoe County Health and Medical Coalition (ESF-8) Meeting.
- 3) Conduct a Point of Dispensing (POD) Exercise or utilize an actual response to provide new Tippecanoe County Health Department Personnel with familiarity of POD Operations.
- 4) Further develop the MRC and engage volunteers.



## *Methamphetamine*



In 2016, the Environmental Division received nine Indiana State Police Methamphetamine Laboratory Occurrence Reports. This number has dropped significantly from all of the previous years. At the beginning of 2016 there were seven residences that needed remediation from previous years. Of the seven homes, five were remediated, one is a vacant storage trailer, and one is owner occupied.

As of December 31, 2016 there are three homes still in need of remediation and of those three homes, only one is occupied at the present time. The Tippecanoe County Health Department has pursued legal action in the owner occupied residence.

Since 2008, the Health Department has received a total of 197 Occurrence Reports. The Tippecanoe County Health Department is continuing to work with the Indiana State Police to update the website. The following are the guidelines for Clandestine Labs placement on the website.

### Clandestine Labs listed on this website fit the following criteria:

- At least 180 days have passed since the seizure of the lab by law enforcement, if the address is a “property” as defined by IC 5-2-6-19(b);
- Locations not defined as “property” will be listed approximately 30 days after the seizure of the lab;
- It has been no more than 90 days since the approval of the Qualified Inspector’s Certificate of Illegal Drug Lab Cleanup (form 53276) received from IDEM;
- The lab was reported to the Indiana State Police (ISP) either through an ISP criminal incident report or via EPIC 143 report submission by another police agency;
  - The lab was seized January 1, 2007, or after.

### Clandestine labs not listed on this website may fit the following criteria:

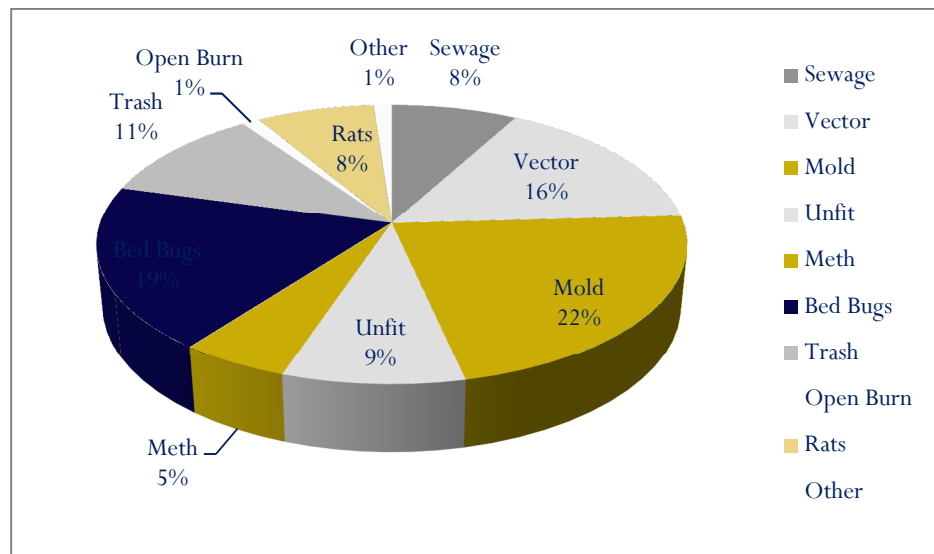
- The lab was not reported to the Indiana State Police;
- The report has not been reviewed by the ISP;
- It has not been 180 days since the seizure of the lab on a “property” as defined by IC 5-2-6-19(b);
- A “property” was certified clean by submission of form 53276 to IDEM and the ISP prior to the initial 180 day wait period expiring; The lab was seized December 31, 2006, or before.

# Mold

In 2016, the Health Department received **thirty nine complaints** of mold in homes. Thirty eight of these complaints were followed up with testing after a physician's recommendation was given to the Health Department. The Health Department will request an indoor air evaluation, to be performed by The Indiana State Department of Health Industrial Hygienist, after receiving a physician's request. The Hygienist will test the air quality for fungal and bacteria counts, carbon dioxide levels, relative humidity, and temperature. A report will be generated and sent to the Health Department and person who made the complaint.

In the State of Indiana, there are no limits established as an acceptable concentration of fungal count indoors. The State has guidelines that recommend fewer counts indoors than outdoors.

## 2016 Complaints Chart by Type

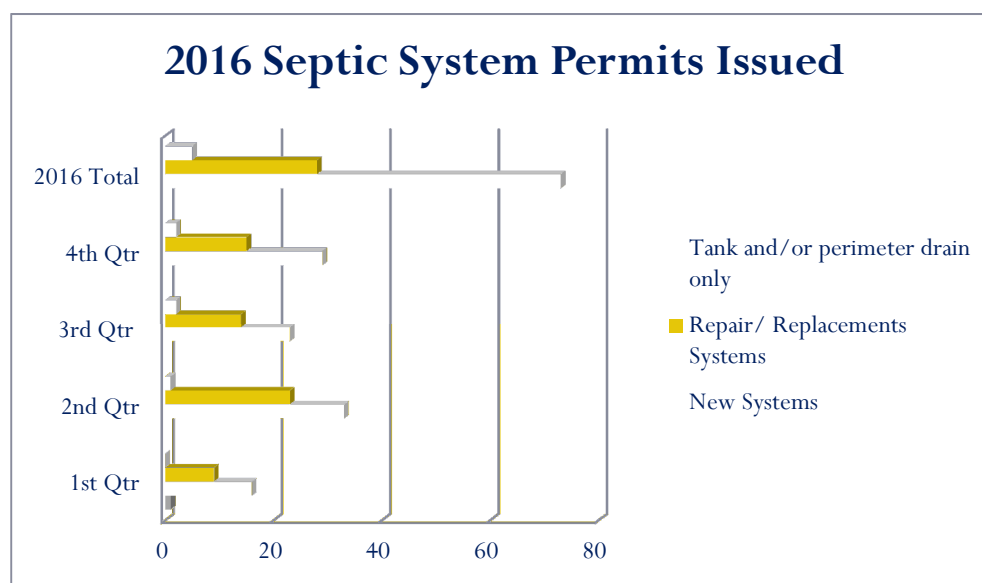


The chart above is a guide to the 181 environmental complaints received by the Health Department in 2016. The bed bug and rat categories have been separated out to see the importance in the rising complaints of these health concerns. Additional information on both vector issues has been added to this report.

Considering the effect bed bugs have on public health and the challenges associated with their control it will take a coordinated group effort to address bed bug infestations in a community. The Health Department will keep assessing this environmental concern in the future.

## Sewage Systems

The environmental division oversees the permitting and inspection of residential and commercial on-site sewage disposal systems or septic systems. The chart below distinguishes the type of permits issued in 2016. There were a total of 167 permits issued and 192 systems inspected.



## Environmental Health Goals for 2017

Continue research and review the certification and testing of a program to regulate on-site sewage disposal system installers that complete new and repair/replacements sewage disposal systems in Tippecanoe County.

Continue to research and review other community's bed bug ordinances and make an assessment to accommodate the needs of Tippecanoe County. Monitor and educate the community on bed bug infestations to enhance the health and safety of residents in Tippecanoe County.

Assemble an education community outreach program on vector control, emphasizing on Rabies and West Nile Virus. Provide this program to the public, during health fairs and community events.



# EPIDEMIOLOGY

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In 2016 the Community Health Needs Assessment (CHNA) was finished and distributed to the Health Coalition (HAT) members, health care agencies and other service organizations. A Community Health Improvement Plan should follow in 2017.

Heads Up, an after school tutoring program at low income housing works with the local school, property management and the health department to provide children at risk academic help, structure in their lives and life skills. This all year round program is at Briarwood, Country Villa and Woods Edge Trailer park. This health outreach/after school program has impacted the lives at least 100 at risk children. In addition we have contact with their parents. The health department has hosted or been a part of several health fairs at Section 8 housing in 2016. The department has collaborated with the local IU/PU Medical students to offer these health fairs. The students provide free screenings and we provided education about nutrition, STDs and marketplace health care.



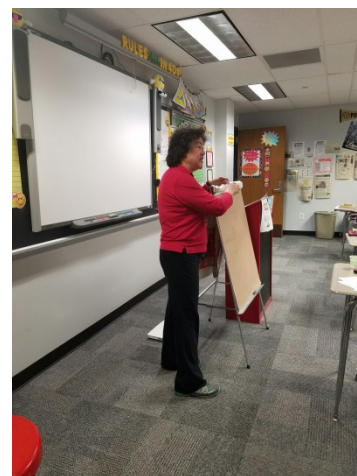
Our programs work through the entire calendar year, not just the school year. Over the summer we provide lunch for food insecure children. We also hold enrichment twice a week to help maintain academic skills, work on kindergarten readiness and life skills.

There were visits from naturalists, PU engineers and scientists, exercise instructors, musicians, the local book store, field trips and many more activities.

Our Biosurveillance project with Marion County has helped document the need for our syringe exchange program. We are in the second year of the project and Andrea Radford has been a productive resource for us. We are now able to receive up to date data on Emergency Room admittance. This is critical in outbreaks such as measles and chickenpox.

Community sharing Gardens has become a major downtown movement. The Health department has a garden in the parking lot in Centennial neighborhood and was one of the first. The Lincoln garden is very large and was started by the Health department and Health Coalition several years ago. It is the largest and most productive downtown garden. It can feed many people. There are now several gardens and Lafayette Economic Development has formed Grow Local, a committee that represents the community gardens and writes grants for funding.

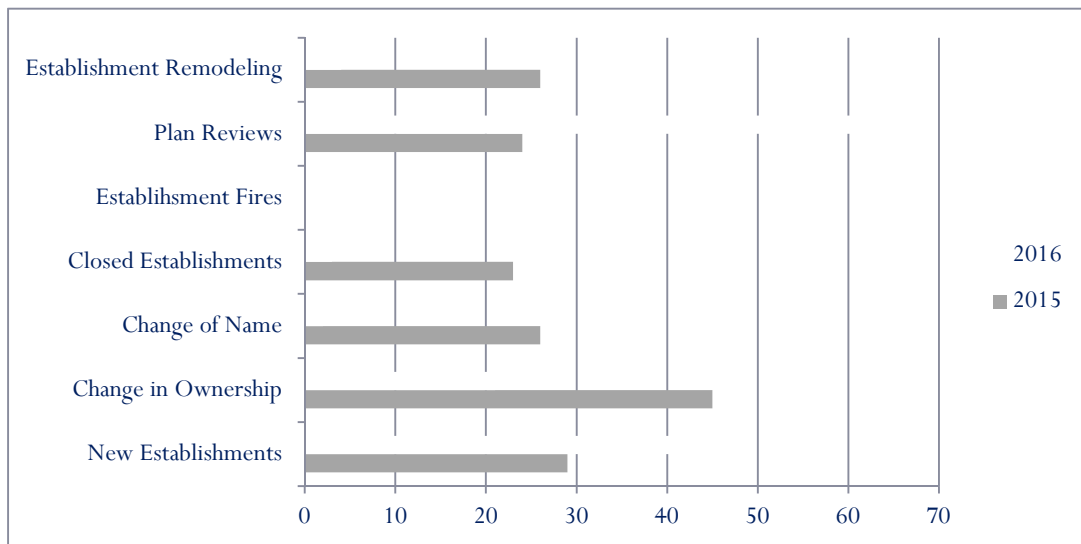
As a guest speaker about health at Tecumseh Jr. High every quarter, the department has been able to create a Body Mass Index (BMI) benchmark for over a decade of the Lafayette seventh grade population. The data has been anonymous and can be used for research projects. I have been able to speak about eating local and healthy, energy drinks, sleep, exercise guidelines and a myriad of other health topics. The students have learned to calculate their own BMI.



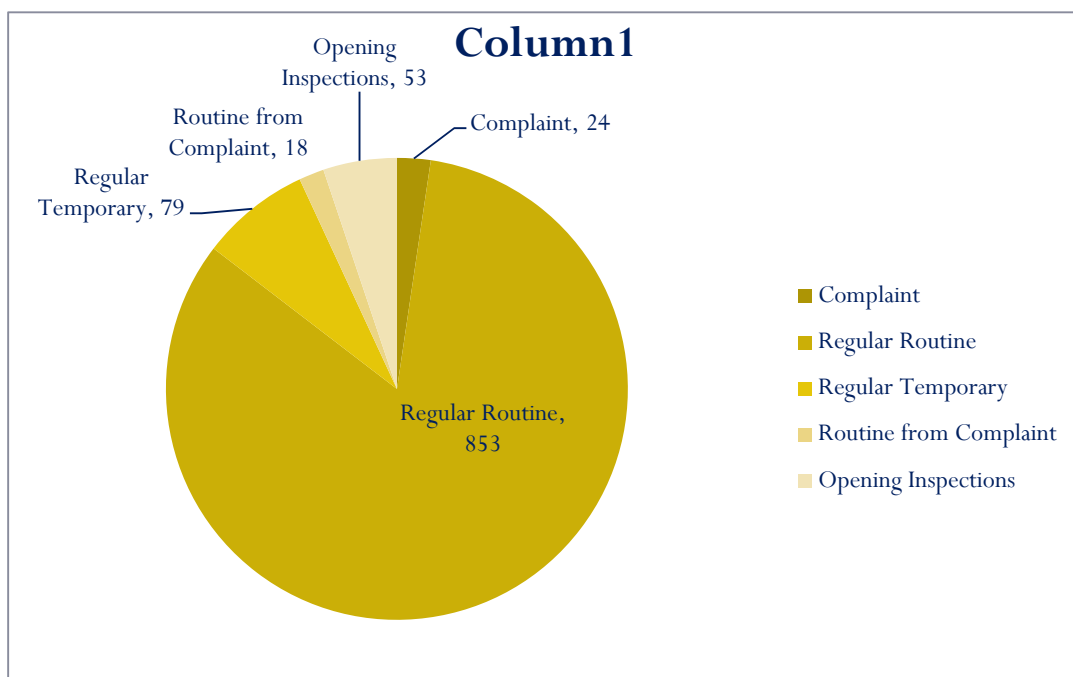


# FOODS

The Foods Division surveys all of The Tippecanoe County area restaurants, mobile units, festivals and temporary events. Tippecanoe County has over 700 restaurants to inspect twice a year and provide surveillance for complaints, fires and new establishments. 2016 has seen a major increase in the number of new establishments within the county limits.



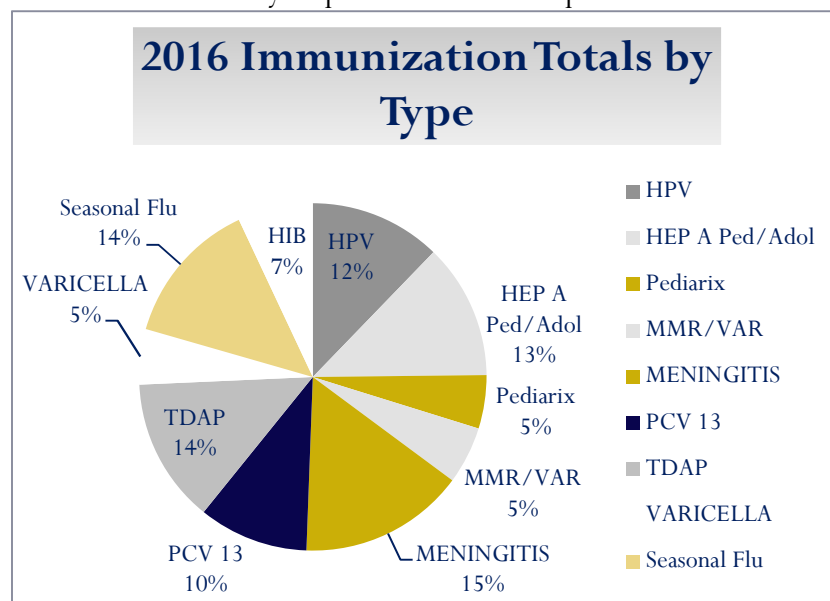
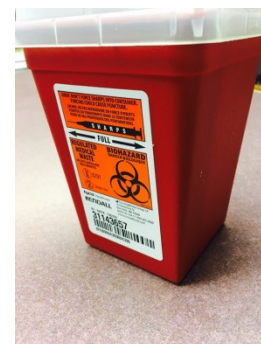
With over 40 years of service, Foods Supervisor Dave Drinan retired. In addition the foods division is preparing for additional staff to help take on the increase of workload due to the growth of new establishments and temporary events within the county. The division continues to have monthly meetings; which has resulted in better communication and quality inspections.



# IMMUNIZATION DIVISION

Tippecanoe County Health Department (TCHD) strives to reduce or eliminate indigenous cases of vaccine preventable diseases through vaccine administration. TCHD provides immunizations to all ages in the community by appointment only. TCHD nurses work closely with our partners to ensure that the community is vaccinated. In 2016, TCHD held four Back to School Clinics and one clinic with Lafayette School Corporation to help increase the number of children who met the immunization requirement to attend school. TCHD nurses also helped coordinate and administer MMR vaccine during the Mumps outbreak at Purdue University. In 2016, TCHD nurses administered a total of 5,478 immunizations and had 2,662 visits.

In 2016, TCHD nursing division launched a travel clinic. The travel clinic provides vaccines needed for traveling abroad that were not routinely available before. The travel clinic is a licensed yellow fever vaccination center. Patients are issued an International Certificate of Vaccination and educated on vaccine-preventable diseases, safe food and water consumption, safety and security, and malaria prevention. The travel clinic has not only been a source of revenue for TCHD, but also another option for those in the community needing low cost travel immunizations. TCHD was awarded an immunization grant through ISDH in 2016. Through this grant TCHD worked on building a stronger adult immunization program striving for a stronger, healthier community. Our aim was to increase patient and healthcare providers' awareness of the importance of adult immunizations. We did this by providing educational material and an informational dinner to providers in the community. We also launched a public media campaign to increase the community awareness on adult immunization through billboards, radio ads, and a commercial. We held two "Lunch in the Park" events where we provided free lunch and educational materials to participants. We saw approximately 172 people at the Lunch in the Park events and were able to immunize several of them for free through the Indiana State Department of Health publicly funded vaccine program. Through the immunization grant we were able to increase the rate of adult immunizations by 12 percent in 2016 compared to 2015.



## 2017 Immunization Goal

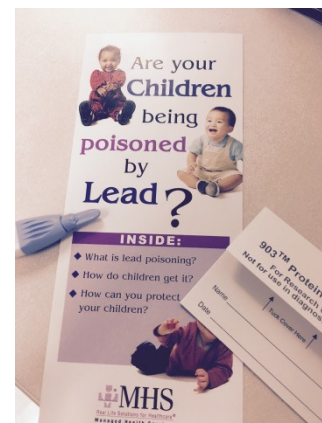
In 2017, TCHD will be working to increase the number of children and adults in Tippecanoe County who are up to date on immunizations. We are planning on having educational events in the community to help promote the importance of immunization and we will be holding special immunization clinics in the community for individuals to receive needed immunizations.

# LEAD POISONING & PREVENTION PROGRAM

Lead testing is conducted at Tippecanoe County Health Department (TCHD). Lead testing is part of our routine immunization schedule and is offered at 15 months of age. Additionally, any child under the age of 7 who has never been tested or is at risk for lead poisoning can be tested by appointment or at our walk-in clinic, available on the 2<sup>nd</sup> Monday of each month from 8:30-11:30 am.

In 2016, we sent educational packets to local school administrators and teachers of kindergarten and 1<sup>st</sup> grade in all three Tippecanoe County school districts as well as local private schools. The packets explained the impact of lead poisoning on children and importance of testing with the goal of reaching teachers and parents.

Tippecanoe County Health Department has also been partnered with Purdue School of Nursing since 2011 to offer free lead testing to children at the annual Child Wellness Day Event. Also, we work with WIC and Bauer Head Start to offer free lead and hemoglobin testing 1-2 times each year.



Lead Screening Data	2016	2015
#of children that received case management services	13	6
Total Tests Performed	178	149
Elevated lead levels reported by private physicians (>or equal to 5mcg/dL)	49	67
Level 0-4.9 mcg/dL	94	147
Level 5-9.9 mcg/dL *requires follow up testing in 6 months and educational materials but not case management	44	54
Level 10-19.9 mcg/dL	11	10
Level 20 mcg/dL and above	21	5
Home visits	8	4

## 2017 Lead Poisoning and Prevention Program Goal

In 2017 the Indiana State Department of Health will be lowering the blood lead level for investigation to 5.0 mcg/dL down from 10.0 mcg/dL. This is per Indiana Code Article 29. The Tippecanoe County Health Department will begin this process at the start of 2017. Our goal is to start this process and be prepared to meet this state requirement as soon as it becomes effective by having the process in place.

# COMMUNICABLE DISEASE PROGRAM

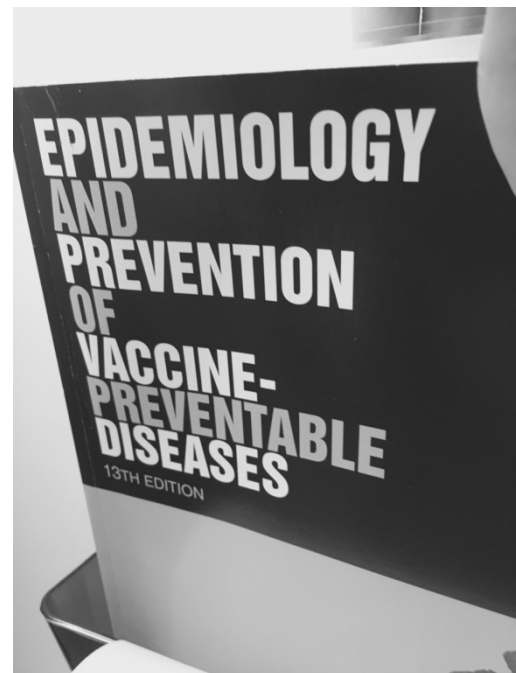
Tippecanoe County Health Department conducts surveillance, investigation, and follow-up on all reportable communicable diseases and outbreaks. According to Indiana Administrative Code 410 IAC 1-2.3-49 (2)(b) the local health department in the jurisdiction where the patient is a resident is responsible for instituting control measures and performing any epidemiological investigation required in a reasonable timeframe. Reports can be submitted to Tippecanoe County Health Department via fax on a Communicable Disease Reporting Form, or electronically through the Indiana National Electronic Database Surveillance System. This information is reviewed to determine disease trends, risk factors, and the effectiveness of various immunizations and medications.

Reportable Communicable Disease	2016 Total Confirmed Cases ^	2015 Total Confirmed Cases ^	2016 Total Investigations Completed *^	2015 Total Investigations Completed *^
Animal Bites	198	223	198	223
Campylobacter	17	9	17	9
Giardiasis	5	5	6	5
Hepatitis B	10	19	15	24
Lyme Disease	6	7	13	14
Shigella	12	15	12	20
Step Pneumonia	14	5	14	6

\*Includes cases deemed unknown, suspect, probable. However, investigations must be initiated in order to make the final status determination. ^ For Patient privacy, investigated and confirmed cases of any disease are **not publicly reported if the total is less than 5**.

## 2017 Communicable Disease Goal

In 2017, Tippecanoe County Health Department will continue to educate the community providers and other entities on the proper way to report communicable disease diagnoses and suspect cases to ensure the TCHD can quickly investigate and track communicable trends and outbreaks in the community.



# TUBERCULOSIS PROGRAM

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Tuberculosis (TB) is a bacterial infection caused by the bacteria, *Mycobacterium tuberculosis*. TB can occur anywhere in the body, but pulmonary TB is considered a communicable and reportable disease. This year the Tippecanoe County Health Department (TCHD) has been informing providers, hospitals, clinics and urgent care facilities, within our community, of the need to report this disease. We have had a good



response from the community on this issue.

Preventing tuberculosis spread is accomplished by not only treating the active cases that are reported, but also treating the latent cases of TB as well. Preventing tuberculosis by treating the latent TB infection is a cornerstone of the U.S. strategy for TB elimination. The TCHD's TB program investigates and manages all cases of pulmonary TB.

In 2016 there were 217 latent cases of TB infections identified in the county, with the majority of them from Purdue University's international student population 155. There were 39 reported cases from other community reporting and 23 were identified by TCHD testing. Latent TB therapy is offered to all patients with a positive TB skin test (TST) or positive IGRA blood test (QGT or T-Spot), a negative chest x-ray showing no active infection and an evaluation indicating no symptoms of active disease. This means the patient has the tuberculosis bacteria detected in this or her body but it is lying dormant and is not infectious.

In 2016 the TCHD investigated 5 suspect cases of active TB and 3 cases of active TB. Treatment of active pulmonary TB disease consists of directly observed therapy (DOT) and is mandatory for the patient. This requires the public health nurse to observe the patient taking the medication which allows optimal medication management and can lead to better compliance.

Latent TB therapy is optional and the patient is offered medication at no cost to them. The decision to take medication, or watch for signs and symptoms over their lifetime, is for patients to make. In 2016 TCHD began conducting chest clinic for patients with latent TB every Thursday. This was done to meet the need of the 12 week DOT therapy for latent TB treatment. This is a new regimen that requires the patient to be observed taking their medication and must come to the health department every



week. This is a more popular regimen as it completes the therapy in 4 months. The other therapies are for 6-9 months and the patient comes to the health department monthly to obtain the medication and review symptoms, but the patient takes the medication daily on their own. The weekly chest clinics have also helped with the international population from Purdue University. Due to Purdue's change in processes, we do not have a chest clinic on campus at this time and the students have been coming to the TCHD to receive their medications. The additional clinics have assisted in their compliance.

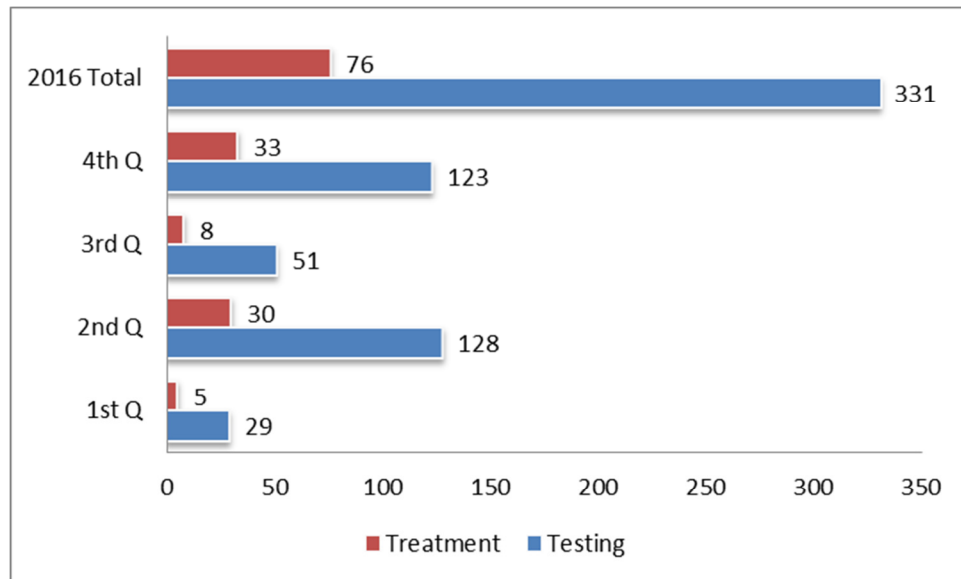
It is our goal to continue to work with the Purdue University Student Health (PUSH) to return to the Purdue campus for chest clinic to facilitate the treatment of their population. We will also continue to assist the community with their reporting and support them as we all work toward the elimination of TB.

## STD DIVISION (SEXUALLY TRANSMITTED DISEASES)

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The goal of the clinic is to prevent the spread of STDs by promoting safe sex and by providing the necessary resources those in need. We test for chlamydia, gonorrhea, syphilis, and HIV at our location. Our goal to prevent the spread of STDs is accomplished by providing low cost testing and treatment to those who are affected. Along with the low cost testing and treatment, each interaction is supplemented with education, safe sex items, and referrals to those who are interested. We are currently working with Brandon Halleck and Marvinna Jones from the Indiana State Department of Health for case investigations of syphilis and HIV clients because there is not currently a Disease Intervention Specialist in District 4.

The table is a summary of the patients the Tippecanoe County Health Department has assisted in 2016.



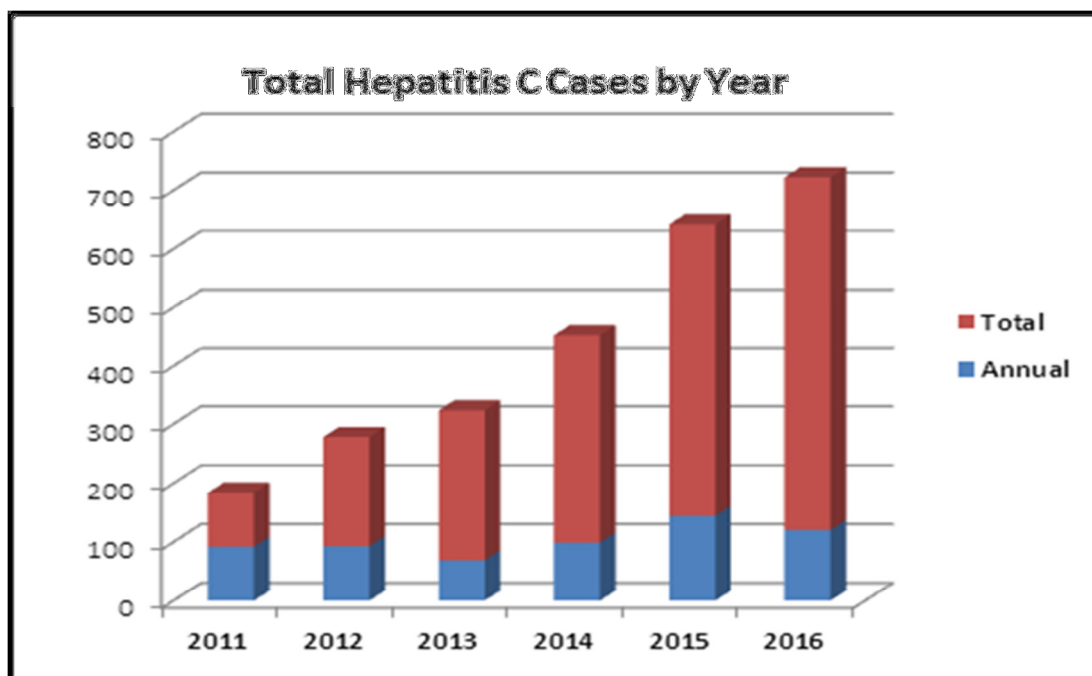
# HEPATITIS C INTERVENTION

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According to the Centers for Disease Control and Prevention (CDC), Hepatitis C is a contagious liver disease that ranges in severity from a mild illness lasting a few weeks to a serious, lifelong illness that attacks the liver. It results from infection with the Hepatitis C virus (HCV), which is spread primarily through contact with the blood of an infected person. Hepatitis C can be either “acute” or “chronic.” The Tippecanoe County Health Department (TCHD) has noticed a rapid increase of Hepatitis C cases in Tippecanoe County since 2011 according to the data obtained from the Indiana National Electronic Disease Surveillance System. Through investigations done on each reportable case it was determined that a high number of the new cases are linked to injection drug use. The CDC estimates that at least 75% of new Hepatitis C cases are due to injection drug use.

On October 17, 2016 the Tippecanoe County Health Officer declared a public health emergency due to the identification of a Hepatitis C Virus (HCV) epidemic within our county. According to the Indiana State Department of Health to decrease the spread of Hepatitis C a harm reduction program is required immediately. On December 15, 2016 Tippecanoe County Syringe Exchange Program Proposal was approved by Indiana State Department of Health with a formal declaration of public health emergency in Tippecanoe County.

Tippecanoe County Health Department will be launching their syringe exchange known as Gateway to Hope in 2017. Establishing a syringe exchange program will help prevent the transmission of Hepatitis C and HIV. Also, Gateway to Hope will provide patients with direct linkage to health care services that include addiction treatment, mental health services, social services agencies, and insurance navigators. It will also allow TCHD to provide quick, accurate testing of Hepatitis C and HIV.



*\*2016 numbers are subject to change as cases are closed and reviewed by Indiana Department of Health*



# VITAL STATISTICS

This division is responsible for recording all births and deaths that occur in Tippecanoe County. In 2016, 3,605 births and 1,416 deaths were recorded. This year, the department issued over 12,000 certified copies of birth and death records.

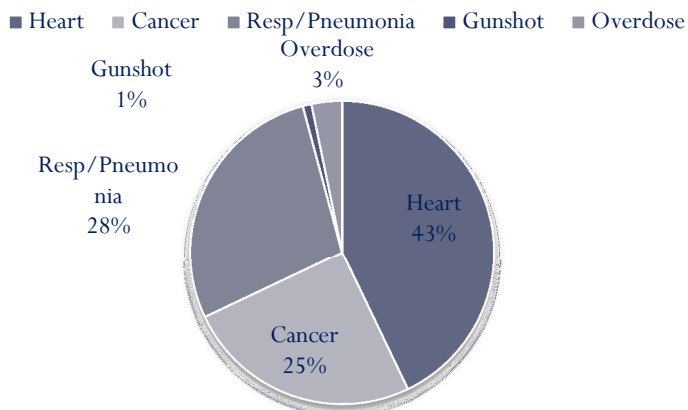
Birth records have been through several changes this year with Same-Sex Parents being honored on the birth records after the court case. Also, birth certificates were changed from Mother and Father to Parent and Parent to reflect the court case changes.



Death records included multiple drug overdoses and a rise in gunshot deaths. These numbers continue to grow in the county.

Birth Stats	2014	2015	2016
Total Births	3398	3591	3605
% Of Certificates Issued for New Births	56%	67%	64%
Legitimate Births	2139	2234	2222
Illegitimate Births	1259	1357	1383
Teen Pregnancies (11-19yo)	205	227	208
Teen Pregnancies- Married	25	26	17
Teen Pregnancies- PA Filed	136	148	139
Single Teen Moms	44	53	52
Total Single Moms	243	317	336
Total PA's Filed	1016	1040	1047

## Top 5 Cause of Death in 2016



## 2017 Goals

**Goal 1:** Modify vital records statistics to reflect relevant information recorded from birth and death records.

**Goal 2:** Collaborate with the Indiana State Department of Health to develop the new State-wide Vital Records Program.

# WIC (WOMEN, INFANTS & CHILDREN)

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The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is a federally funded program. WIC provides services to low-income pregnant, postpartum, and breastfeeding women, along with infants and children up to age five who are at health or nutritional risk.

WIC provides supplemental healthy foods, nutrition assessments and education, referrals to other health and social services, and breastfeeding support and promotion. WIC strives to help clients achieve a positive change in their dietary and physical activity habits. Indiana WIC has placed an emphasis on providing participant centered services to WIC clients, reducing infant mortality, and lowering childhood obesity.



WIC participates yearly in the Farmers Market Nutrition Program (FMNP).

In 2016, Indiana WIC clients were eligible for \$24.00 in FMNP checks to redeem for Indiana grown fresh fruits and vegetables.

Since 2014, Tippecanoe County WIC has been issuing the FMNP checks at the Lafayette and West Lafayette farmers markets.

In Tippecanoe County, after starting to issue checks at the farmers markets instead of at the WIC offices, redemption rates increased from around 45% to around 75%.

In 2016, Tippecanoe County WIC had the highest redemption of FMNP checks of any Indiana WIC program at 75.48%. The average redemption rate for the state was 45.18%. \$7608 was spent in WIC FMNP checks in Tippecanoe County to support local farms and our community.

In 2016, Indiana WIC transitioned to eWIC cards (electronic benefit transfer cards) instead of checks/vouchers for WIC benefits. The transition began with pilot programs at the beginning of 2016 and all counties in the state transitioned to the cards by the end of September. Tippecanoe County WIC transitioned to the new computer system, INWIC, and eWIC cards in July. All WIC staff had training on the new computer program prior to the transition. Overall, the transition to the new computer program and eWIC cards has been smooth. To start, there were a few minor issues with the new system and some concerns using the cards at the grocery stores. Local WIC agencies, state staff and the computer software company have worked together to resolve these issues. Clients have been enjoying using the eWIC cards and find the process easier than using the WIC checks.

## **Tippecanoe County WIC Goals for 2017:**

- Improve outreach and communication within the community in an effort to increase referrals
- Continue increasing breastfeeding initiation and duration rates
- Focus on prenatal and postpartum nutrition education including weight gain during pregnancy and interconception health
- Improve participant centered services through customer service training
- Increase client participation in nutrition education activities with new classes:  
Physical activity, Cooking with your toddler and Gardening



# ACKNOWLEDGEMENTS

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John Basham, at large

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